

APPLICATION INFORMATION

Application number::
Filing Date:: 12/03/2001
Application Type:: Regular
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: none
Number of CR disks::
Number of copies of CDs::
Sequence submission?:: none
Computer Readable Form (CRF)?:: No
Number of copies of CRF::
Title:: METHYLOTROPHIC BACTERIUM FOR THE
PRODUCTION OF RECOMBINANT PROTEINS AND
OTHER PRODUCTS

Attorney Docket Number:: 2139-18US FC
Request for Early Publication?:: no
Request for Non-Publication?:: no
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: no
Latin name::
Variety denomination name::
Petition included?:: no
Petition Type::
Secrecy Order in Parent Appl.?:: no

INVENTOR INFORMATION

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full-capacity
Given name:: Marianne
Middle name:: M.
Family name:: FIGUEIRA
Name Suffix::
City of Residence:: Laval
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 4540 Promenade Paton, Apt. 504

City:: Laval
State or Province:: Québec

1 2 3 4 5 6 7 8 9 0

Country::	Canada
Postal or Zip Code::	H7W 4W6
Inventor Authority Type::	Inventor
Primary Citizenship Country::	CANADA
Status::	Full-capacity
Given name::	Louise
Middle name::	
Family name::	LARAMÉE
Name Suffix::	
City of Residence::	Lasalle
State or Province of Residence::	Québec
Country of Residence::	Canada
Street::	1579 Marie-Claire
City::	Lasalle
State or Province::	Québec
Country::	Canada
Postal or Zip Code::	H8N 1R8
Inventor Authority Type::	Inventor
Primary Citizenship Country::	British
Status::	Non-signing
Given name::	J.
Middle name::	Colin
Family name::	MURRELL
Name Suffix::	
City of Residence::	Conventry
State or Province of Residence::	
Country of Residence::	United Kingdom
Street::	University of Warwick
	Biological Sciences
City::	Coventry
State or Province::	
Country::	United Kingdom
Postal or Zip Code::	CV4 7AL
Inventor Authority Type::	Inventor
Primary Citizenship Country::	Canada
Status::	Full-capacity
Given name::	Louise
Middle name::	
Family name::	BÉLANGER

Name Suffix::
City of Residence:: Saint-Hyacinthe
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 2120 Vézina

City:: Saint-Hyacinthe
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: J2S 8N2

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full-capacity
Given name:: Denis
Middle name::
Family name:: GROLEAU
Name Suffix::
City of Residence:: Laval
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 1735 Mont-Carmel

City:: Laval
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: H7E 4C9

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full-capacity
Given name:: Carlos
Middle name:: B.
Family name:: MIGUEZ
Name Suffix::
City of Residence:: Pierrefonds
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 13118 Varennes

City:: Pierrefonds
State or Province:: Québec
Country:: Canada

Postal or Zip Code:: H8Z 1J8

Inventor Authority Type::

Primary Citizenship Country::

Status::

Given name::

Middle name::

Family name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street::

City::

State or Province::

Country::

Postal or Zip Code::

Inventor Authority Type::

Primary Citizenship Country::

Status::

Given name::

Middle name::

Family name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street::

City::

State or Province::

Country::

Postal or Zip Code::

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 020988

Phone number:: (514) 845-7126

Fax:: (514) 288-8389

E-Mail Address:: swapat@swabey.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 020988

DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

FOREIGN PRIORITY INFORMATION

Country:: Application Number:: Filing Date::

ASSIGNEE INFORMATION

Assignee name:: NATIONAL RESEARCH COUNCIL OF CANADA
Street:: 1200 Montreal Road

City:: Ottawa
State or Province:: Ontario
Country:: Canada
Postal or Zip Code:: K1A 0R6